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APPLICANTS

Steven Moder, Simi Valley, CA;

Emmanuel C. Francisco, Northridge, CA;

Richard Rubio, Altadena, CA; James F. Beshears, San Marino, CA;

** CONTINUING DATA *****

NONE *NR*

** FOREIGN APPLICATIONS *****

NONE *NR*

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 9	TOTAL CLAIMS 7	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>NR</i> Initials				

ADDRESS

00758
 FENWICK & WEST LLP
 SILICON VALLEY CENTER
 801 CALIFORNIA STREET
 MOUNTAIN VIEW, CA
 94041

TITLE

Virtual collaborative editing room

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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